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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for	Gary First name	Aida First name
	example, your driver's license or passport).	Middle name	S. Middle name
	Bring your picture identification to your meeting with the trustee.	Prince Last name and Suffix (Sr., Jr., II, III)	Prince Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9883	xxx-xx-5063

Debtor 1 Gary Prince
Debtor 2 Aida S. Prince

Case number (if known)

		About Debtor 1:	1	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names			☐ I have not used any business name or EINs. FDBA Addie's Attic Business name(s) EIN			
5.	Where you live	4556 State Route 52	I	f Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	1	Number, Street, City, State & ZIP Code			
		Sullivan	_				
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	1	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:		Check one:			
	рапктирісу	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	'	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	[☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	tor 1 tor 2	Gary Prince Aida S. Prince					Case numbe	「 (if known)	
Par	t 2:	Tell the Court About \	Your Bankru	ptcy Ca	ase				
7.	The d	e chapter of the nkruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy						
	choo	sing to file under	■ Chapter	7					
			☐ Chapter						
			☐ Chapter						
			☐ Chapter						
				.0					
8.	How	you will pay the fee	abou order	t how yo . If your	e entire fee when I file my ou may pay. Typically, if you attorney is submitting your address.	are paying the fe	ee yourself, you m	ay pay with cash, cashie	er's check, or money
					y the fee in installments.		option, sign and a	ttach the Application for	Individuals to Pay
			☐ I requ	uest tha	ee in Installments (Official Fo at my fee be waived (You r quired to, waive your fee, an	nay request this o			
			applie	es to yo	ur family size and you are u on to Have the Chapter 7 Fi	nable to pay the	fee in installments). If you choose this option	on, you must fill out
9.		ave you filed for ankruptcy within the ast 8 years?	■ No.						
			☐ Yes.						
		,		District		When		Case number	
				District		When		Case number	
				District		When		Case number	
10.		ny bankruptcy	■ No						
	filed not fi you, partr	s pending or being by a spouse who is ling this case with or by a business er, or by an	☐ Yes.						
	affilia	ite?		Dahtan				Dalatia nahin ta waw	
				Debtor District		When		Relationship to you Case number, if known	
				Debtor		when		Relationship to you	
				District		When	-	Case number, if known	
11.		ou rent your ence?	■ No.		line 12.				
			☐ Yes.	Has yo	our landlord obtained an evi	ction judgment ac	gainst you?		
					No. Go to line 12.				
					Yes. Fill out <i>Initial Stateme</i> this bankruptcy petition.	ent About an Evic	tion Judgment Ag	ainst You (Form 101A) a	nd file it as part of

	otor 1 Gary Prince otor 2 Aida S. Prince				Case number (if known)
Par	Report About Any Bu	ısinesses	You Owi	າ as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busi	iness
	A sole proprietorship is a ousiness you operate as				
	an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attacted are you a small business cash-flow statement, and federal income tax return or if any of \$\\ \text{defined by 11 U.S.C. }\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\			under Suchoosing v statemen)(B).	can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.	
	For a definition of small	No.	i am	not filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	Report if You Own or	Have Any	/ Hazard	ous Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?	
	identifiable hazard to public health or safety?				
	Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

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 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

	Incapa	city.
--	--------	-------

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. 21-35108-cgm Doc 1 Filed 02/16/21 Entered 02/16/21 18:59:26 Main Document Pg 6 of 63

	tor 2 Aida S. Prince				Case no	umber (if known)				
Par	6: Answer These Quest	ions for Re _l	porting Purposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily condividual primarily for a perso			e defined in 11 U.S.C. §	3 101(8) as "incurred by an			
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
			Are your debts primarily but money for a business or inves							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you ov	ve that are not consur	mer debts or bu	ısiness debts				
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapter 7	7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and administrative expenses	— 163.	am filing under Chapter 7. Dare paid that funds will be ava				nd administrative expenses			
	are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes							
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-5	50,000			
	you estimate that you owe?	□ 50-99		5001-10,000		☐ 50,001-1	·			
		☐ 100-199 ☐ 200-999		□ 10,001-25,0	00	☐ More tha	ın100,000			
19.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001	- \$10 million	□ \$500,00	0,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,00°	1 - \$100,000	□ \$10,000,001	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		000,001 - \$10 billion			
			01 - \$500,000 01 - \$1 million				,000,001 - \$50 billion an \$50 billion			
		\$500,00	1) - \$1 million	\$100,000,00	π - φουσ πιιιιοι	ii iiioie iiia	III 430 DIIIIOH			
20.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001	- \$10 million		0,001 - \$1 billion			
	estimate your liabilities to be?		1 - \$100,000		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		\$1,000,000,001 - \$10 billion			
		_	01 - \$500,000 01 - \$1 million	☐ \$50,000,000 ☐ \$100,000,00			0,000,001 - \$50 billion an \$50 billion			
Par	7: Sign Below									
For	you	I have exa	mined this petition, and I decl	are under penalty of p	perjury that the	information provided is	true and correct.			
			nosen to file under Chapter 7, tes Code. I understand the re							
			ey represents me and I did no I have obtained and read the				elp me fill out this			
		I request re	elief in accordance with the ch	napter of title 11, Unite	ed States Code	, specified in this petition	on.			
			nd making a false statement, or case can result in fines up to							
		/s/ Gary I			/s/ Aida S. F					
		Gary Prin	of Debtor 1		Signature of D					
		Executed of	on February 10, 2021		Executed on	February 10, 2021				
			MM / DD / YYYY			MM / DD / YYYY				

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	Pg 7 of 63							
Debtor 1 Gary Prince Aida S. Prince		Cas	se number (if known)					
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)					
If you are not represented by an attorney, you do not need to file this page.			wledge after an inquiry that the information in the					
	/s/ Richard Scott Zirt, Esq.	Date	February 10, 2021					
	Signature of Attorney for Debtor		MM / DD / YYYY					
	Richard Scott Zirt, Esq.							
	Printed name							
	Law Offices of Richard Scott Zirt							
	Firm name							
	7 St. John Street - Suite 101							
	P.O. Box 1315							
	Monticello, NY 12701							
	Number, Street, City, State & ZIP Code							
	Contact phone (845) 794-5928	Email address	richardzirt@gmail.com					
	(RSZ7350) NY							
	Bar number & State							

21-3	35108-cgm	Doc 1		1 Entered 02/16/2 Pg 8 of 63	1 18:59:26 Ma	ain Docu	ıment
Fill in this info	rmation to identify	your case:					
Debtor 1	Gary Prince)	Middle Name	Last Name			
Debtor 2	Aida S. Prin	ce	Wildele Name	Last Name			
(Spouse if, filing)	First Name		Middle Name	Last Name			
United States B	ankruptcy Court for	r the: SO	UTHERN DISTRICT	OF NEW YORK			
Case number (if known)							if this is an ed filing
	orm 106Sui		Liabilities an	d Certain Statistica	al Information	1.	2/15
information. Fill	l out all of your sc	hedules fire	st; then complete the	are filing together, both are e information on this form. I the box at the top of this pa	If you are filing amende		
Part 1: Sumr	marize Your Asset	ts					
						Your as: Value of	sets what you own
	A/B: Property (Offine 55, Total real es					\$	511,000.00

Your liabilities Amount you owe

Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D...

1b. Copy line 62, Total personal property, from Schedule A/B.....

1c. Copy line 63, Total of all property on Schedule A/B.....

809,163.21

25,122.76

536.122.76

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 0.00

77,604.20

Your total liabilities

Part 3: Summarize Your Income and Expenses

- Schedule I: Your Income (Official Form 106I) 4,044.80 Copy your combined monthly income from line 12 of Schedule I.....
- Schedule J: Your Expenses (Official Form 106J) 4.430.78 Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 Ú.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Deptor 2	Aida S. Prince	Case number (if known)	
	m the Statement of Your Current Monthly Income: Cop A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 L		\$ 3,420.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Gary Prince

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		og		· · · · ·	Pg 10 of 63	3				
Fill	in this inform	nation to identif	y your case and th	is filin	g:					
Deb	otor 1	Gary Prince	e							
Dak	-t 0	First Name		Name	Last Nan	ne				
	otor 2 use, if filing)	Aida S. Pri		Name	Last Nan	ne				
Uni	tad States Bar	nkruptcy Court fo	or the: SOLITHER	N DIST	RICT OF NEW YORK					
Oili	ied States Dai	ikiupicy Court it	or the. Occirrent	IV DIOT	INOT OF INEW FORK					
Cas	se number _								_	heck if this is an
									a	mended filing
Sc In ea	chedule ch category, se cit fits best. Be	eparately list and as complete and	roperty describe items. List a	e. If two	only once. If an asset f married people are filin his form. On the top of a	g together, both are	equally resp	onsible for su	the cate	correct
	ver every quest	tion.	•		Estate You Own or Hav	, , ,	,			
	Yes. Where is	the property?								
1.1	AFEC Ctata	Davita E0		Wha	is the property? Check a	III that apply				
		te Route 52 Single-family home		Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> :						
					Duplex or multi-unit buil Condominium or coope	_				red by Property.
	Jeffersonv	ville NY	12748-0000			home	Current va			nt value of the
	City	State	ZIP Code		Investment property		\$21	0,000.00		\$210,000.00
							(such as fe	ee simple, ten		ership interest the entireties, or
				Who	has an interest in the pr Debtor 1 only	roperty? Check one	a life estat	e), if known.		
	Sullivan				,					
	County				Debtor 1 and Debtor 2	only	- Check	if this is com	munity	property
					At least one of the debt	ors and another		structions)		F. 5001.J
					r information you wish t erty identification numb		m, such as lo	cal		

Official Form 106A/B Schedule A/B: Property page 1

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Debt		ida S. Prince			Case	number (if known)		
	If you o	wn or have mor	e than one. lis	t here:				
1.2	,	0	oa oo,o		at is the property? Check all that apply			
_	92 Circle Drive			_	Single-family home	Do not deduct secu	ured claims or	exemptions. Put
	Street addre	ess, if available, or other of	description		Duplex or multi-unit building	the amount of any a		
					Condominium or cooperative	Crouncie IIIIe		
				Г	Manufactured or mobile home			
	Oak Rid	lae NJ	07438-0000	_		Current value of t		ent value of the
-	City	State			<u>-</u>	entire property? \$301,000	=	on you own? \$301,000.00
	,			Ē	,			
					Other	Describe the natu (such as fee simp		
				Who	has an interest in the property? Check one	a life estate), if kn	own.	
-	Passaic	;		_	Debtor 2 only			
	County				- 202101 : 41.14 202101 2 01.11)	☐ Check if this	is community	property
						(see instructions		
					er information you wish to add about this iter perty identification number:	n, such as local		
	ages you				your entries from Part 1, including any er here			\$511,000.00
	No	trucks, tractors,	sport dumity verm	cies, mor	orcycles			
•	Yes							
3.1	Make:	Hyundai		Who has	an interest in the property? Check one	Do not deduct sec		
	Model:	Tucson			1 only	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
	Year:	2019		☐ Debtor	· 2 only	Current value of t	the Curre	ent value of the
	Approxin	nate mileage:	16,100+/-	☐ Debtor	1 and Debtor 2 only	entire property?		on you own?
	Other inf	ormation:		☐ At leas	et one of the debtors and another			
					t if this is community property structions)	\$17,467	<u></u>	\$17,467.00
Exa	amples: B No Yes	oats, trailers, moto			reational vehicles, other vehicles, and a ing vessels, snowmobiles, motorcycle acc			
					your entries from Part 2, including any or here			\$17,467.00
.pa	ages you		r Part 2. Write th	at numbe				\$17,467.00
.pa	ages you B: Descri	have attached for	r Part 2. Write th	at numbe			Curren	\$17,467.00 t value of the
.pa Part 3	ages you B: Descri	have attached for	r Part 2. Write th	at numbe	r here		portion	·

Official Form 106A/B

21-35108-cgm Doc 1 Filed 02/16/21 Entered 02/16/21 18:59:26 Main Document Pa 12 of 63 Debtor 1 **Gary Prince** Debtor 2 Aida S. Prince Case number (if known) 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$2,500.00 Misc. Household Goods & Furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$500.00 2 TVs, Cellphone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$300.00 Misc. Wearing Apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$450.00 1 Wedding Band, 1 Watch 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3.750.00

Schedule A/B: Property

for Part 3. Write that number here

Official Form 106A/B

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Debtor 1 Debtor 2	Gary Prince Aida S. Prince		Case number (if known)	
Part 4:	Describe Your Financial Ass	ets		
	own or have any legal or		any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No			ome, in a safe deposit box, and on hand when you file your petition	
			ounts; certificates of deposit; shares in credit unions, brokerage hou with the same institution, list each.	ses, and other similar
■ Ye	S		Institution name:	
	17.1	Checking	Chase Bank	\$1,048.48
	17.2	Saving	Chase Bank	\$34.38
	17.3	Checking	Jeff Bank	\$834.81
	17.4	. Savings	Jeff Bank	\$250.00
	17.5	Checking	Chase	\$4.00
	17.6	. Checking	Chase Bank - f/d/b/a Attie's Attic	\$905.29
<i>Exai</i> ■ No	•		okerage firms, money market accounts	
	venture	d interests in incorpo	orated and unincorporated businesses, including an interest in	an LLC, partnership, and
	s. Give specific informatio	n about themame of entity:	 % of ownership:	
Neg	otiable instruments include	personal checks, cas	stiable and non-negotiable instruments theirs' checks, promissory notes, and money orders. Insfer to someone by signing or delivering them.	
	s. Give specific information	n about them suer name:		
<i>Exai</i> □ No	•	IISA, Keogh, 401(k), 4	03(b), thrift savings accounts, or other pension or profit-sharing pla	ns
- Yes	s. List each account separ Type	ately. e of account:	Institution name:	

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1 Debtor 2	Gary Prince Aida S. Prince			Case number (if know	n)
	401	к	Empower Retireme		\$0.00
Yours		sits you have made so th	nat you may continue service ublic utilities (electric, gas, wa	e or use from a company ater), telecommunications comp	panies, or others
			Institution name or indiv	vidual:	
23. Annui ■ No	ties (A contract for a per	iodic payment of money	to you, either for life or for a	number of years)	
☐ Yes.	lssuer na	ame and description.			
26 U.S.	sts in an education IRA .C. §§ 530(b)(1), 529A(b		ılified ABLE program, or uı	nder a qualified state tuition p	orogram.
■ No □ Yes.	Institution	n name and description.	Separately file the records of	of any interests.11 U.S.C. § 521((c):
25. Trusts	s, equitable or future in	terests in property (oth	er than anything listed in I	line 1), and rights or powers e	exercisable for your benefit
☐ Yes.	Give specific information	on about them			
-	, ., . ,	,	other intellectual property s from royalties and licensing		
	Give specific information	on about them			
		ner general intangibles xclusive licenses, cooper		iquor licenses, professional lice	nses
	Give specific information	on about them			
Money or	property owed to you?	,			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re ■ No	funds owed to you				
	Give specific informatio	n about them, including v	whether you already filed the	e returns and the tax years	
■ No			oport, child support, maintena	ance, divorce settlement, prope	rty settlement
Exam _i				ay, vacation pay, workers' comp	pensation, Social Security
■ No □ Yes.	Give specific information	on			
	sts in insurance policientles: Health, disability, o		avings account (HSA); credit	t, homeowner's, or renter's insu	rance
		mpany of each policy and Company name:	d list its value.	Beneficiary:	Surrender or refund

Official Form 106A/B Schedule A/B: Property page 5

value:

21-35108-cgm Doc 1 Filed 02/16/21 Entered 02/16/21 18:59:26 Main Document Pa 15 of 63 Debtor 1 **Gary Prince** Debtor 2 Aida S. Prince Case number (if known) **Lincoln Benefits Mutual** Aida S. Prince \$0.00 **Term Life Insurance** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$3,076.96 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership □ No Yes. Give specific information.......

Tes. Give specific information.......

\$828.80

54. Add the dollar value of all of your entries from Part 7. Write that number here

Joint Debtor receives Social Security of \$828.80 monthly

\$828.80

Official Form 106A/B Schedule A/B: Property page 6

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Gary Prince Debtor 1 Debtor 2 Aida S. Prince Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$511,000.00 Part 2: Total vehicles, line 5 \$17,467.00 Part 3: Total personal and household items, line 15 \$3,750.00 57. 58. Part 4: Total financial assets, line 36 \$3,076.96 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$828.80 Total personal property. Add lines 56 through 61... \$25,122.76 Copy personal property total \$25,122.76 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$536,122.76

Official Form 106A/B Schedule A/B: Property page 7

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			<u> </u>				
Fill in this information to identify your case:							
Debtor 1	Gary Prince						
	First Name	Middle Name	Last Name				
Debtor 2	Aida S. Prince						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF NEW YORK				
Case number _							
(if known)					Check if this is an amended filing		
					· ·		

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property	You Claim as Exempt
---------	-----------------------	---------------------

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	4556 State Route 52 Jeffersonville, NY 12748 Sullivan County	\$210,000.00	•	\$20,335.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	2019 Hyundai Tucson 16,100+/- miles Line from Schedule A/B: 3.1	\$17,467.00		\$4,000.00	11 U.S.C. § 522(d)(2)				
Line nom Schedule A	Elle Holli Gericadie A.B. G.1			100% of fair market value, up to any applicable statutory limit					
	Misc. Household Goods & Furnishings	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	2 TVs, Cellphone Line from Schedule A/B: 7.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Elle Holli Gericadie A.B. 711			100% of fair market value, up to any applicable statutory limit					
	Misc. Wearing Apparel Line from Schedule A/B: 11.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)				
	Elic Holl Gollevale AVD. 1111			100% of fair market value, up to any applicable statutory limit					

s that allow exemption
§ 522(d)(4)
§ 522(d)(5)
§ 522(d)(12)
§ 522(d)(11)(C)
§ 522(d)(10)(A)

Official Form 106C

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		· ·	Pg 19 of 63			
Fill i	n this inform	ation to identify you	ır case:			
Debt	or 1	Gary Prince			\Box	
		First Name	Middle Name Last Name			
Debt (Spous	or 2 se if, filing)	Aida S. Prince First Name	Middle Name Last Name		-	
Unite	ed States Ban	kruptcy Court for the:	SOUTHERN DISTRICT OF NEW YORK		_	
Case	number					
(if kno	wn)				_	if this is an
					ameno	ded filing
Offi	cial Form	106D				
		-	Who Have Claims Secure	d by Propert	У	12/15
Be as	complete and	accurate as possible.	If two married people are filing together, both are e	qually responsible for s	upplying correct informa	tion. If more space
	ded, copy the a er (if known).	Additional Page, fill it	out, number the entries, and attach it to this form. (On the top of any addition	nal pages, write your na	me and case
1. Do a	any creditors h	nave claims secured by	y your property?			
	☐ No. Check	this box and submit t	his form to the court with your other schedules. \	ou have nothing else	to report on this form.	
	Yes. Fill in a	all of the information	below.			
Part	1: List All	Secured Claims				
	<u> </u>		more than one secured claim, list the creditor separatel	Column A	Column B	Column C
for ea	ich claim. If mo	re than one creditor has	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Bank of An Loans	nerica Home	Describe the property that secures the claim:	\$595,951.31	\$301,000.00	\$294,951.31
· · · · · ·	Creditor's Name		92 Circle Drive Oak Ridge, NJ 07438			
			Passaic County			
	Attn: Presi		As of the date you file, the claim is: Check all that			
	P.O. Box 3	33631-3785	apply.			
		City, State & Zip Code	☐ Contingent ☐ Unliquidated			
	rambor, ourou,	ony, crate a 2.p code	☐ Disputed			
Who	owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
■ De	ebtor 1 only		☐ An agreement you made (such as mortgage or se	ecured		
□ De	ebtor 2 only		car loan)			
	ebtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
		e debtors and another	☐ Judgment lien from a lawsuit			
	heck if this cla ommunity deb		Other (including a right to offset) Mortgage			

Date debt was incurred

Last 4 digits of account number 9430

Debt			Case number (if known)		
Dobt	First Name Middle N	ame Last Name			
Debli	or 2 Aida S. Prince First Name Middle N	ame Last Name			
2.2	Capital One Auto Finance	Describe the property that secures the claim:	\$23,542.67	\$17,467.00	\$6,075.67
	Creditor's Name	2019 Hyundai Tucson 16,100+/-			
	Attn: President	miles			
	P.O. Box 60511	As of the date you file, the claim is: Check all tha	 t		
	City of Industry, CA 91716-0511	apply.			
-		☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who	owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ De	ebtor 1 only	An agreement you made (such as mortgage of	r secured		
□ De	ebtor 2 only	car loan)			
□ De	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)		
☐ At	least one of the debtors and another	☐ Judgment lien from a lawsuit			
	neck if this claim relates to a	Other (including a right to offset)			
С	ommunity debt				
Date	debt was incurred	Last 4 digits of account number 17	44		
	Citizens One Home				
2.3	Loans	Describe the property that secures the claim:	\$189,669.23	\$210,000.00	\$0.00
	Creditor's Name	4556 State Route 52 Jeffersonville,	7		
	Attn: President	NY 12748 Sullivan County			
	P.O. Box 42111	As of the date you file, the claim is: Check all that			
	Providence, RI	apply.	ı		
	02940-2111	☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
■ De	ebtor 1 only	An agreement you made (such as mortgage o	r secured		
□ De	ebtor 2 only	car loan)			
□ De	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)		
☐ At	least one of the debtors and another	☐ Judgment lien from a lawsuit			
	neck if this claim relates to a ommunity debt	Other (including a right to offset) Mortgag	ge		
Date	debt was incurred	Last 4 digits of account number 22	33		
			4000 100 01	7	
		column A on this page. Write that number here:	\$809,163.21		
	te that number here:	the dollar value totals from all pages.	\$809,163.21		
Part	List Others to Be Notified for	or a Debt That You Already Listed			
trying than	to collect from you for a debt you o	e notified about your bankruptcy for a debt that owe to someone else, list the creditor in Part 1, a t you listed in Part 1, list the additional creditors nis page.	nd then list the collection agency	here. Similarly, if you	u have more
[]	Name, Number, Street, City, State &		which line in Part 1 did you enter th	e creditor? 2.1	
	Frenkel, Lambert, Weiss e		at 4 digita of apparent sounds		
	Attn: Managing Partner 80 Main Street, Suite 460 West Orange, NJ 07052	Las	st 4 digits of account number		

Debtor 1	Gary Prince			Case number (if known)
	First Name	Middle Name	Last Name	
Debtor 2	Aida S. Prince			
	First Name	Middle Name	Last Name	
F S	lame, Number, Street, Cit RJ Hughes Justice Superior Court Cler P.O. Box 971 Tenton, NJ 08625-	Complex k's Office		On which line in Part 1 did you enter the creditor?

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			Pg	22 of 63			
Fill in this info	rmation to identify your	case:	Ĭ				
Debtor 1	Gary Prince						
Debtor 1	First Name	Middle Nam	 ne	Last Name		—	
Debtor 2	Aida S. Prince						
(Spouse if, filing)	First Name	Middle Nam	ie	Last Name			
United States R	ankruptcy Court for the:	SOUTHERN	DISTRICT OF N	NEW YORK			
Office Glates B	annuptcy Court for the.	000111211111	310111101 01 1	VEVV TOTAL			
Case number							
(if known)							heck if this is an
						a	mended filing
Official For	m 106E/E						
		lha Hava I	Inconura	d Claima			12/15
	E/F: Creditors W						
any executory co Schedule G: Exec Schedule D: Cred left. Attach the Co name and case no	ntracts or unexpired leases cutory Contracts and Unexp litors Who Have Claims Sec ontinuation Page to this pag umber (if known).	that could result ired Leases (Offi ured by Property je. If you have no	in a claim. Also cial Form 106G). If more space is information to r	list executory Do not include needed, copy	contracts on Sched any creditors with the Part you need, t	ule A/B: Property (Offici partially secured claims fill it out, number the en	al Form 106A/B) and on that are listed in tries in the boxes on the
	All of Your PRIORITY Un						
1. Do any credi	itors have priority unsecure	d claims against	you?				
No. Go to	Part 2.						
☐ Yes.							
	All of Your NONPRIORIT						
3. Do any credi	itors have nonpriority unsec	cured claims agai	nst you?				
☐ No. You h	ave nothing to report in this p	art. Submit this for	m to the court wit	th your other sch	edules.		
Yes.							
4. List all of yo	ur nonpriority unsecured cl	aims in the alpha	betical order of	the creditor wh	o holds each claim.	If a creditor has more tha	n one nonpriority
unsecured cla	aim, list the creditor separately ditor holds a particular claim, I	y for each claim. F	or each claim liste	ed, identify what	type of claim it is. Do	not list claims already inc	luded in Part 1. If more
							Total claim
4.1 Ameri	can Express Platinum	Card L	ast 4 digits of ac	count number	1002		\$400.84
	ity Creditor's Name		g				
	President	V	Vhen was the de	bt incurred?			_
_	ox 659728	_					
	ntonio, TX 78265-9728 Street City State Zip Code		s of the date ve	u filo the claim	is: Check all that app	alv.	
	curred the debt? Check one.	,	s of the date you	u ille, tile cialili	is. Check all that app	лу -	
☐ Debte		-	7				
_	·		Contingent				
_	or 2 only	_	Unliquidated				
	or 1 and Debtor 2 only	_	Disputed				
☐ At lea	ast one of the debtors and and	_	ype of NONPRIC	ORITY unsecure	ed claim:		
	ck if this claim is for a com	nunity	Student loans				
debt	aim auhiaatta -#+0				aration agreement or	divorce that you did not	
	aim subject to offset?		eport as priority cl				
■ No			•	•	ng plans, and other si	imilar debts	
☐ Yes			Other. Specify	Credit Card	d		_

	Gary Prince Aida S. Prince	Case number (if known)	
	Barclay Card Services Nonpriority Creditor's Name	Last 4 digits of account number 8565	\$6,032.68
	Attn: President P.O. Box 8802 Wilmington, DE 19899-8802	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
	Barclay Card Services Nonpriority Creditor's Name	Last 4 digits of account number 0342	\$1,587.85
	Attn: President P.O. Box 13337 Philadelphia, PA 19101-3337	When was the debt incurred?	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$791.45
	Attn: President P.O. Box 30285	When was the debt incurred?	
	Salt Lake City, UT 84130		
_	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes		
	□ 162	Other. Specify Credit Card	

btor 2 Aida S. Prince	Case number (if known)	
Chase - Amazon Rewards	Last 4 digits of account number 5013	\$10,455.73
Nonpriority Creditor's Name Attn: President P.O. Box 15123	When was the debt incurred?	
Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Chase Card Services	Last 4 digits of account number 7952	\$2,063.91
Nonpriority Creditor's Name Attn: President	When was the debt incurred?	
P.O. Box 6294		
Carol Stream, IL 60197-6294	_	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
☐ Debtor 1 only	☐ Contingent	
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	
Citizens One Auto Finance		\$6,635.25
Nonpriority Creditor's Name	Last 4 digits of account number 3100	φ0,033.23
Attn: President P.O. Box 42113	When was the debt incurred?	
Providence, RI 02940 Number Street City State Zip Code	As of the date you file the claim in Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No	_ Deficiency Balance on repossessed	
☐ Yes	■ Other. Specify Hyundai Accent	

Attn: President P.O. Box 30953 Salt Lake City, UT 84130-0953 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Chef. Specify Credit Card Att least one of the debtors hame Attn: President P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Sireet City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Disputed Type of NoNPRIORITY unsecured claim: Contingent Contingent Debtor 1 and Debtor 3 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 3 only Disputed Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 3 only Disputed Dispute		1 Gary Prince 12 Aida S. Prince	Case number (if known)	
Active President P.O. Box 182125 CoLumbus, OH 43218-2125 Number Street City State 2ip Code When incurred the debt? Check one. Debtor 1 only	4.8	Comenity Bank	Last 4 digits of account number 0396	\$1 <i>4</i> 596 3 <i>4</i>
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 3 only Debtor 4 bear 2 only Debtor 4 bear 3 one of the debtors and another Check if this claim is for a community debt Student bans Debtor 4 bear 3 one of the debtors and another Check if this claim is for a community debt Student bans Debtor 4 bear 4 digits of account number 6503 \$5,426		Nonpriority Creditor's Name Attn: President P.O. Box 182125		ψ1 4,030.34
Debtor 2 only Deliguidated Disputed Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 profess Debtor 2 only Debtor 3 profess Debtor 2 profess Debtor 3 profess Debtor 4 profess Debtor 5 profess Debtor 4 profess Debtor 4 profess Debtor 5 profess Deb		Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Debtor 1 and Debtor 2 only		☐ Debtor 1 only	☐ Contingent	
At least one of the debtors and another Check if this claim is for a community debt Student loans Stud		■ Debtor 2 only	☐ Unliquidated	
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts Obligations arising p		☐ Debtor 1 and Debtor 2 only	☐ Disputed	
Check it this claim is for a community debt St. te claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority ideating plans, and other similar debts		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Discover Attr. President Po. Box 30953 Sait Lake City, UT 84130-0953 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only No Yes No Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Credit Card When was the debt incurred? Last 4 digits of account number Student loans Debts to pension or profit-sharing plans, and other similar debts Credit Card When was the debt incurred? Last 4 digits of account number Attr.: President P.O. Box 6497 Sloux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Attreast one of the debtors and another Debtor 1 only Debtor 2 only At least one of the debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply		☐ Check if this claim is for a community	☐ Student loans	
Discover Assistance Last 4 digits of account number 6503 \$5,426				
4.3 Discover		■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Attn: President P.O. Box 30953 Salt Lake City, UT 84130-0953 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Chef. Specify Credit Card Att least one of the debtors hame Attn: President P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Sireet City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Disputed Type of NoNPRIORITY unsecured claim: Contingent Contingent Debtor 1 and Debtor 3 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 3 only Disputed Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 3 only Disputed Dispute		Yes	■ Other. Specify Credit Card	
Attn: President P.O. Box 30953 Salt Lake City, UT 84130-0953 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Disputed	4.9		Last 4 digits of account number 6503	\$5,426.43
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 ond of the debtors and another Structure Type of NoNPRIORITY unsecured claim: Student loans Debtor 3 ond of the debtors and another Student loans Debtor 4 one Depot Student loans Debtor 5 one Type of NoNPRIORITY unsecured claim: Student loans Debtor 6 one Type of NoNPRIORITY unsecured claim: Student loans Debtor 6 one Type of NoNPRIORITY unsecured claim: Student loans Debtor 1 one Depot Student loans		Attn: President P.O. Box 30953	When was the debt incurred?	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Debtor 2 only Disputed At least one of the debtors and another Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Attr. President P.O. Box 6497 Sloux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Street City State Zip Code Who incurred the debt? Check one. State At least one of the debtors and another Street City State Zip Code Who incurred the debt? Check one. State At least one of the debtors and another Street City State Zip Code Other Specify Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Student loans Other Specify Debtor 2 only Debtor 1 street City State Zip Code Nonpriority Claims Debtor 1 and Debtor 2 only Disputed Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Salt Lake City, UT 84130-0953	As of the date year file the plains in Charles II that such	
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Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Last 4 digits of account number Attn: President P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Unkno Unkno Unkno Unkno Other. Specify Credit Card Unkno Unkno Other. Specify Credit Card Unk			Contingent	
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At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim subject to offset? Credit Card Debts to pension or profit-sharing plans, and other similar debts Credit Card Unkno Nonpriority Creditor's Name Attn: President P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Type of NONPRIORITY unsecured claim: Student loans Credit Card Unkno When was the debt incurred? As of the date you file, the claim is: Check all that apply Unkno Unkno Unkno Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			<u> </u>	
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Credit Card Home Depot			•	
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Home Depot Nonpriority Creditor's Name Attn: President P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Credit Card Unkno When was the debt incurred? As of the date you file, the claim is: Check all that apply Unkno Unkno Unkno Unkno When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Unkno Unkno When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Unkno Obligations arising out of a separation agreement or divorce that you did not report as priority claims		debt		
Home Depot Nonpriority Creditor's Name Attn: President P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Credit Card Unkno When was the debt incurred? As of the date you file, the claim is: Check all that apply Unkno Unkno Unkno Unkno When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Unkno Unkno When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Unkno Obligations arising out of a separation agreement or divorce that you did not report as priority claims		■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Nonpriority Creditor's Name Attn: President P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number 8210 When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
Nonpriority Creditor's Name Attn: President P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Home Depot	Last 4 digits of account number 8210	Unknown
P.O. Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply		Nonpriority Creditor's Name		
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Street City State Zip Code Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed		P.O. Box 6497	When was the debt incurred?	
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Debtor 1 only	Contingent	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		<u> </u>		
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		<u> </u>		
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			•	
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		<u></u>	<u></u>	
		debt		
■ No □ Debts to pension or profit-sharing plans, and other similar debts		■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify Credit Card		□Yes	■ Other. Specify Credit Card	

	r 1 Gary Prince r 2 Aida S. Prince	Case number (if known)	
4.1 1	Jersey Central Power & Light	Last 4 digits of account number 8021	\$368.71
	Nonpriority Creditor's Name Attn: President P.O. Box 3687 Akron, OH 44309-3687	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility	
4.1	Lincare, Inc.	Last 4 digits of account number 9138	\$119.09
	Nonpriority Creditor's Name Attn: President P.O. Box 690397 Orlando, FL 32869	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Supplies	
4.1	Montclair Radiology Group Nonpriority Creditor's Name	Last 4 digits of account number0165	\$1,042.55
	Attn: President 116 Park Street Montclair, NJ 07042	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Services	

	1 Gary Prince 2 Aida S. Prince	Case number (if known)				
4.1	Northwest Radiology Associates	Last 4 digits of account number 5685	\$171.60			
	Nonpriority Creditor's Name Attn: President 45 Pine Street, Suite 8 Rockaway, NJ 07866	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	□ Debtor 1 only ■ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Signature				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Services				
4.1	Optimum Nonpriority Creditor's Name	Last 4 digits of account number	\$518.70			
	Attn: President 1111 Stewert Avenue Bethpage, NY 11714-3581	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Utility				
4.1	Prosper Funding, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$9,604.95			
	Attn: President 221 Main Street, Suite 300 San Francisco, CA 94105	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not				
		report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	Yes	Other. Specify Personal Loan				

Pulmonary Medical Assoc.,LLP	Last 4 digits of account number 2997	\$30.0
Nonpriority Creditor's Name Attn: President	When was the debt incurred?	
222 High Street, Suite 102		
Newton, NJ 07860-9604		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other Specify Medical Services	
St. Clare's Denville Hospital Nonpriority Creditor's Name	Last 4 digits of account number 9278	\$152.50
Attn: President	When was the debt incurred?	
25 Pocono Road		
Denville, NJ 07834 Number Street City State Zip Code	As of the date you file the claim is: Check all that cont.	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services	
Subaru Motors Finance	Last 4 digits of account number 1898	Unknowr
Nonpriority Creditor's Name	Last 4 digits of account number	<u> </u>
Attn: President	When was the debt incurred?	
P.O. Box 901076 Fort Worth, TX 76101-2076		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Deficiency Balance for Surrendered Leased 2018 Subaru Outback, September 2020	

	r 1 Gary Prince r 2 Aida S. Prince	Case number (if known)				
4.2	Synchrony Bank	Last 4 digits of account number 6115	\$11,145.86			
	Nonpriority Creditor's Name Attn: President 55 Beattie Place, Suite 110 Greenville, SC 29601	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card				
4.2	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number 3071	Unknown			
	Attn: President P.O. Box 965033 Orlando, FL 32896-0061	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card				
4.2	Synchrony Bank - Amazon Nonpriority Creditor's Name	Last 4 digits of account number 9731	\$3,280.67			
	Attn: President P.O. Box 965060 Orlando, FL 32896-0061	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	□ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit Card				

Debtor Debtor	1 Gary Prince 2 Aida S. Prince	Case number (if known)					
4.2	Synchrony Bank - CareCredit	Last 4 digits of account numb	ner 8691	\$3,179.09			
	Nonpriority Creditor's Name Attn: President P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent	☐ Contingent				
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	□ Obligations arising out of a series of the seri	separation agreement or divorce that you did not				
	■ No		paring plans, and other similar debts				
	☐ Yes	■ Other Specify Credit C					
4.2	Walmart - Synchony Bank	Last 4 digits of account numb	per 0563	Unknown			
	Nonpriority Creditor's Name Attn: President P.O. Box 965022	When was the debt incurred?					
	Orlando, FL 32896-5022 Number Street City State Zip Code	As of the date you file, the cla	im is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsec	ured claim:				
	☐ Check if this claim is for a community	☐ Student loans	arou oranni				
	debt	_	separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	·	aring plans, and other similar debts				
	Yes	Other. Specify Credit C	ard				
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed					
is tryi have	ng to collect from you for a debt you owe to	someone else, list the original credito nat you listed in Parts 1 or 2, list the a	at you already listed in Parts 1 or 2. For examp or in Parts 1 or 2, then list the collection agency additional creditors here. If you do not have add	here. Similarly, if you			
	nd Address USA. Inc.	On which entry in Part 1 or Part 2 did Line 4.15 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Clai	ma			
	President	Line 4:10 of (Greek Gre).	Part 2: Creditors with Nonpriority Unsecured				
	rt Square West		— Fart 2. Creditors with Nonpholity offsecured	Ciairis			
Long	Island City, NY 11101	Last 4 digits of account number					
N	- d A dd		lint the anti-rinal condition?				
	nd Address tano, Stadtmauer, et al.	On which entry in Part 1 or Part 2 did Line 4.18 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Clai	ms			
Attn:	Managing Partner Box 2594		Part 2: Creditors with Nonpriority Unsecured				
Clifto	n, NJ 07015	Last 4 digits of account number					
Name a	nd Address	On which entry in Part 1 or Part 2 did	vou list the original creditor?				
Certifi	ed Credit & Collection	Line 4.18 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms			
	President		■ Part 2: Creditors with Nonpriority Unsecured	Claims			
_	Box 1750 house Station, NJ 08889						

Official Form 106 E/F

Debtor 1 Gary Prince Debtor 2 Aida S. Prince		Case number (if known)
	Last 4 digits of account number	
Name and Address Chase Automotive Finance Attn: President P.O. Box 78068	On which entry in Part 1 or Part 2 di Line 4.19 of (Check one):	d you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Phoenix, AZ 85062-8068	Last 4 digits of account number	
Name and Address Credit Control Attn: President P.O. Box 4635	On which entry in Part 1 or Part 2 di Line 4.5 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Chesterfield, MO 63006	Last 4 digits of account number	
Name and Address First Source Advantage, LLC Attn: President P.O. Box 628 Buffalo, NY 14240-0628	On which entry in Part 1 or Part 2 di Line 4.1 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Kirschenbaum & Phillips, PC 40 Daniel Street, Ste 7 P.O. Box 9000	On which entry in Part 1 or Part 2 di Line 4.20 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Farmingdale, NY 11735	Last 4 digits of account number	
Name and Address LVNV Funding, LLC Attn: President P.O. Box 10584	On which entry in Part 1 or Part 2 di Line 4.20 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Greenville, SC 29603	Last 4 digits of account number	
Name and Address Michael Harrison, Esq. Suite 214 3155 Route 10 East Denville, NJ 07834	On which entry in Part 1 or Part 2 di Line 4.14 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Phillips & Cohen Assoc., Ltd. Attn: President 1002 Justison Street Wilmington, DE 19801	On which entry in Part 1 or Part 2 di Line <u>4.2</u> of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Radius Global Solutions, LLC Attn: President P.O. Box 390905 Minneapolis, MN 55439	On which entry in Part 1 or Part 2 di Line 4.9 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Resurgent Capital ServiceLP Attn: President 55 Beatie Place, Suite 110 Greenville, SC 29601	On which entry in Part 1 or Part 2 di Line 4.20 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
· 	Last 4 digits of account number	
Name and Address Resurgent Capital Services, LP Attn: President P.O. Box 10497 Mail Stop 576	On which entry in Part 1 or Part 2 die Line 4.20 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

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Debtor 1 Gary Prince Debtor 2 Aida S. Prince		Case number (if known)
Greenville, SC 29603		
.,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Sherman Originator, III LLC	Line 4.20 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: President 200 Meeting Street		Part 2: Creditors with Nonpriority Unsecured Claims
Charleston, SC 29401		
•	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Sullivan County Clerk's Office	Line 4.22 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Sullivan County Gov't Center 100 North Street		■ Part 2: Creditors with Nonpriority Unsecured Claims
Monticello, NY 12701		
,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Sullivan County Supreme Ct.	Line 4.20 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Supreme Court Clerk 414 Broadway		■ Part 2: Creditors with Nonpriority Unsecured Claims
Monticello, NY 12701		
,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Synchrony Bank	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: President P.O. Box 960061		■ Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896-0061		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Synchrony Bank - Paypal	Line 4.20 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: President P.O. Box 960090		■ Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Zwicker & Associates, PC	Line 4.22 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Managing Partner 80 Minuteman Road		Part 2: Creditors with Nonpriority Unsecured Claims
Andover, MA 01810-1008		
,	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 77,604.20

Aida S. Prince	Case number (if known)	

\$ 77,604.20

Total Nonpriority. Add lines 6f through 6i.

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			3		
Fill in this inform					
Debtor 1	Gary Prince				
	First Name	Middle Name	Last Name		
Debtor 2	Aida S. Prince				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF NEW YORK		
Case number					☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	Oity		Olato	211 0000	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	

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		F	² g 35 of 63			
Fill in this	s information to identify your	case:				
Debtor 1	Gary Prince					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fi	Aida S. Prince	Middle Name	Last Name			
	3,					
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK			
Case nun (if known)	nber				☐ Check if th	
					amended f	filing
Officia	al Form 106H					
	dule H: Your Cod	lobtore				40/45
Scrie	dule n. Toul Cou	ienroi 2				12/15
people are	s are people or entities who a e filing together, both are equ and number the entries in the e and case number (if known	ually responsible for supp boxes on the left. Attach	lying correct information the Additional Page to	on. If more space is	needed, copy the Add	litional Page,
1. Do	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse a	s a codebtor.		
□ No ■ Ye						
	thin the last 8 years, have you na, California, Idaho, Louisiana					include
_	o. Go to line 3. s. Did your spouse, former spo	use or legal equivalent live	with you at the time?			
	o. Dia your opouco, formor opo	doo, or logal oquivalent live	war you at the time.			
in lin Form	olumn 1, list all of your codeb e 2 again as a codebtor only i 106D), Schedule E/F (Officia column 2.	if that person is a guarant	or or cosigner. Make s	ure you have listed	the creditor on Sched	ule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	'IP Code		Column 2: The cr Check all schedu	reditor to whom you o les that apply:	we the debt
3.1	Rebecca Prince 13 Decker Farm Road Monticello, NY 12701			☐ Schedule D, ■ Schedule E/F □ Schedule G Citizens One A	-, line <u>4.7</u>	

Fill	in this information to identify your	case:								
Del	otor 1 Gary Prince	9			_					
	otor 2 Aida S. Prin	_								
Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	CT OF NEW YORK		_					
	se number lown)		-				ed fi ent	iling showing postp of the following		chapter
0	fficial Form 106I					MM / DD/	YYY	Ϋ́		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form. Describe Employment	ur spouse is not filing w On the top of any additi	ith you, do not inclu	ide inforn	natio	on about your sp	ous	e. If more spa	ce is r	needed,
1.	Fill in your employment information.		Debtor 1		Debtor	Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed		☐ Emp	☐ Employed				
		Zimpioyimoni otatao	■ Not employed		■ Not e	■ Not employed				
	employers.	Occupation	Unemployed			Unemp	loy	/ed		
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mo	. ,								
Esti spou	mate monthly income as of the cuse unless you are separated. u or your non-filing spouse have me space, attach a separate sheet to	date you file this form. If	,			oyers for that person	on c	on the lines belo	ow. If y	J
						For Debtor 1		For Debtor 2 on non-filing spo		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	;	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	-	+\$	0.00	
4.	Calculate gross Income. Add I		4.	\$	0.00		\$0.0	00		

Official Form 106l Schedule I: Your Income page 1

	tor 1 tor 2	Gary Prince Aida S. Prince		Case	number (<i>if known</i>)			
	C =		4	For	Debtor 1	non-f	ebtor 2 or iling spouse	
	Cop	y line 4 here	4.	ъ	0.00	\$	0.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$ -	0.00	\$—	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	3,216.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	828.80	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,216.00	\$	828.80	
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$	-	3,216.00 + \$	82	28.80 = \$	4,044.80
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					-	1,0 1 1100
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen	-			hedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies					Combin	4,044.80 ed
13.	Do	ou expect an increase or decrease within the year after you file this form?	?					-
		No.						
		Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify y	our case:					
Deb	tor 1	Gary Prince	_			Chec	k if this is:	
Dah	tor O	4:1. 0. 5:				_	An amended filing	
	otor 2 ouse, if filing)	Aida S. Prin	<u>ce</u>				A supplement snow 13 expenses as of	wing postpetition chapter the following date:
(Opt	ouse, ii iiiiig)					_		
Unit	ed States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF NEW	YORK	_	MM / DD / YYYY	
	e number nown)							
O	fficial Fo	rm 106J						
		J: Your	Evnor	1606				12/15
				ISCS If two married people ar	o filing together b	-4h	ally room on aible fo	
info	ormation. If m		eeded, atta	ch another sheet to this				
Par	t 1: Desci	ribe Your House	ehold					
1.	Is this a joir	nt case?						
	☐ No. Go to	o line 2.						
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N	lo						
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debt	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents							☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do vour exi	penses include	_	M.	-			□ res
٥.	expenses o	f people other t	than $_{m \Box}$	No Yes				
	yoursell an	d your depende	mts? —					
Par		ate Your Ongo		, .				
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of suc ficial Form 10		id have inc	cluded it on Schedule I: \	our Income		Your exp	enses
`		,						
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgage	e 4. \$		1,652.15
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
	4b. Prope	erty, homeowner'	s, or renter	's insurance		4b. \$		0.00
				upkeep expenses		4c. \$		150.00
_		owner's associa			ma aguite les es	4d. \$ 5. \$		0.00
2	Annitional i	morroade navm	ents for vo	our residence, such as ho	me equity loans	5 %		() ()()

Gary Prince				
Aida S. Prin	ce	Case numl	oer (if known)	
tios:				
	at, natural gas	6a.	\$	231.00
•	•		·	20.00
			· ·	179.00
•	•		·	0.00
			·	650.00
			· -	0.00
			·	50.00
-				50.00
•			· -	130.00
	•		Ť	
		12.	\$	100.00
ertainment, club	os, recreation, newspapers, magazines, and bo	ooks 13.	\$	20.00
ritable contribu	tions and religious donations	14.	\$	0.00
rance.				
				278.25
			· —	0.00
			·	173.81
			\$	0.00
	le taxes deducted from your pay or included in lin		•	
		16.	\$	0.00
		170	c	E00 4E
				580.45
			:	0.00
			·	0.00
, ,			5	0.00
			\$	0.00
		.a		0.00
		-		0.00
,	expenses not included in lines 4 or 5 of this for		ur Income.	
				0.00
Real estate ta	xes	20b.	\$	0.00
Property, hom	eowner's, or renter's insurance	20c.	\$	166.12
Maintenance,	repair, and upkeep expenses	20d.	\$	0.00
		20e.	\$	0.00
er: Specify:		21.	+\$	0.00
—				0.00
•	•		_	
	· ·			4,430.78
Copy line 22 (m	onthly expenses for Debtor 2), if any, from Officia	l Form 106J-2	\$	
Add line 22a an	d 22b. The result is your monthly expenses.		\$	4,430.78
ulato vour mor	athly not income		<u> </u>	
-	-	232	¢	4,044.80
			*	4,430.78
Jopy your mo	miny expenses from the ZZC above.	230.		4,430.70
Subtract vour	monthly expenses from your monthly income			
	our monthly net income.	23c.	\$	-385.98
- · · · <i>,</i>	•	ا ۔۔۔ بند ہو ا		
	ncrease or decrease in your expenses within t			o or docrosse because of
xample, do you ex	pect to finish paying for your car loan within the year or			e or decrease because of
xample, do you ex				e or decrease because of a
	Aida S. Prin ities: Electricity, hea Water, sewer, Telephone, ce Other. Specify d and houseked Idcare and child Ithing, laundry, a sonal care prod Idical and dental Insportation. Include car pa retainment, club Iritable contribu Iritable contrib	Aida S. Prince Ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies Idcare and children's education costs Ithing, laundry, and dry cleaning sonal care products and services Idical and dental expenses Insportation. Include gas, maintenance, bus or train fare. Include car payments. Include car payments. Include insurance deducted from your pay or included in lines and to include insurance deducted from your pay or included in lines are tife insurance Health insurance Vehicle insurance Vehicle insurance. Other insurance. Specify: Iss. Do not include taxes deducted from your pay or included in line cify: Include insurance aliments Car payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Other payments of alimony, maintenance, and support that you discuted from your pay on line 5, Schedule I, Your Income (Officier payments you make to support others who do not live with cify: In payments of alimony, maintenance, and support that you discuted from your pay on the property expenses not included in lines 4 or 5 of this form the second of the property expenses on the property insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues In payments of the property expenses Homeowner's association or condominium dues In payments of the property expenses Homeowner's association or condominium dues In payments of the property expenses Homeowner's association or condominium dues In payments of the property expenses Homeowner's association or condominium dues In payments of the property expenses Hodel lines 4 through 21.	Aidá S. Prince Ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cother. Specify: 6d. d and housekeeping supplies Ideare and children's education costs 8. Shing, laundry, and dry cleaning sonal care products and services Idical and dental expenses 110. Idical and dental expenses 111. Insportation. Include gas, maintenance, bus or train fare. Insportation. Include gas, maintenance, bus or train fare. Instituted care payments. Intialize contributions and religious donations Iritable contributions and religious donations Iritable contributions and religious donations Iritable contributions Include insurance Insportation. Include insurance Insportation. Include gas, maintenance, bus or train fare. Into include insurance deducted from your pay or included in lines 4 or 20. Intialize contributions and religious donations Iritable contributions Intialize contributions Intiali	ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: dand housekeeping supplies dare and children's education costs thing, laundry, and dry cleaning sonal care products and services lical and dental expenses should be care products and services ot include gas, maintenance, bus or train fare. Include car payments. Table contributions and religious donations rance. Include insurance deducted from your pay or included in lines 4 or 20. Life insurance Vehicle insurance Other insurance, specify: Sono to include taxes deducted from your pay or included in lines 4 or 20. offy: Car payments for Vehicle 1 Car payments for Vehicle 2 Other: Specify: The

Fill in this infori	mation to identify your	case:			
Debtor 1	Gary Prince				
	First Name	Middle Name	Last Name		
Debtor 2	Aida S. Prince First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Lastiname		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT O	F NEW YORK		
Case number					
(if known)					heck if this is an mended filing
Official Forr		ın Individual I	Johtor's Sc	hodulos	
Jeciai at	ion About e	iii iiidividaai i	Jebiol 3 JC	<u> </u>	12/15
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorne	y to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Petitic Declaration, and Signatu	
	alty of perjury, I declare e true and correct.	that I have read the summ	ary and schedules filed	d with this declaration and	
X /s/ Gar	ry Prince		X /s/ Aida S. I	Prince	
Gary P			Aida S. Prii	nce	
Signatu	re of Debtor 1		Signature of I	Debtor 2	
Date	February 10, 2021		Date Febr	uary 10, 2021	

=::::::::::::::::::::::::::::::::::::::					
	rmation to identify you	ir case:			
Debtor 1	Gary Prince First Name	Middle Name	Last Name		
Debtor 2	Aida S. Prince				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	SOUTHERN DISTRICT O	OF NEW YORK		
Case number					
(if known)	-			_	Check if this is an amended filing
Official Fo		Affairs for Individ	duals Filing for B	ankruptcy	4/19
information. If number (if known	more space is needed wn). Answer every que	, attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
			Lived Belole		
1. What is yo	our current marital stat	us?			
■ Marrie	ed arried				
2. During the	e last 3 years, have you	lived anywhere other than	where you live now?		
□ No					
_	ist all of the places you	lived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
92 Circle Oak Ride	e Drive ge, NJ 07438	From-To: 1985 to 2018	Same as Debtor	1	Same as Debtor 1 From-To:
states and territo	<i>ori</i> es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Part 2 Expl	lain the Sources of You	ur Income			
Fill in the to	otal amount of income yo	mployment or from operating ou received from all jobs and a laboration income that you received the second of the	all businesses, including part		ndar years?
□ No					
■ Yes. F	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calend (January 1 to I	dar year: December 31, 2020)	■ Wages, commissions, bonuses, tips	\$44,179.57	☐ Wages, commissions, bonuses, tips	\$0.00
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Aff	airs for Individuals Filing for B	ankruptcy	page 1

Debtor Debtor		ary Prin da S. Pr			J	Cas	e number (if known)		
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(before	s income re deductions and sions)	Sources of inco		Gross income (before deductions and exclusions)
			before that: er 31, 2019)	■ Wages, commissions, bonuses, tips		\$108,453.00	☐ Wages, components with the wages in the wages with the wages in the	missions,	\$0.00
				☐ Operating a business			☐ Operating a l	ousiness	
		dar year Decemb	: er 31, 2018)	■ Wages, commissions, bonuses, tips		\$103,751.00	☐ Wages, components	missions,	\$0.00
				☐ Operating a business			☐ Operating a b	ousiness	
Lis	No	source ar	·	ome from each source sepa	rately. Do ı	not include income t	hat you listed in line	e 4.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each (before	s income from source re deductions and sions)	Sources of inco	ome	Gross income (before deductions and exclusions)
		dar year Decemb	: er 31, 2020)			\$0.00	Social Securi	ty	\$11,780.00
Part 3:	e eithe No.	r Debtor Neither individu During No Ye	1's or Debtor 2 r Debtor 1 nor Debtor 1 nor Debtor 1 nor Debtor 2 r Debtor 1 nor Debtor 2 r Debtor 2 nor Debtor 2 r Debtor 2 nor Debtor 2 r Debtor 2 nor Debtor 2	each creditor to whom you peditor. Do not include paym payments to an attorney for ton 4/01/22 and every 3 yer both have primarily con	ner debts? sumer del nold purpos did you pa paid a total ents for do r this bankr ars after th sumer dek	ots. Consumer debt se." y any creditor a tota of \$6,825* or more mestic support obliq uptcy case. at for cases filed on ots.	of \$6,825* or more paying one or more paying ations, such as chi	e? ments and tl ld support a	ne total amount you nd alimony. Also, do
		During No □ Ye	Go to line 7 s List below e include pay	re you filed for bankruptcy, each creditor to whom you perments for domestic support this bankruptcy case.	paid a total	of \$600 or more and	d the total amount y		
Cı	reditor'	's Name	and Address	Dates of payn	nent	Total amount paid	Amount you still owe	Was this p	payment for

21-35108-cgm Doc 1 Filed 02/16/21 Entered 02/16/21 18:59:26 Main Document Pa 43 of 63 Debtor 1 **Gary Prince** Aida S. Prince Debtor 2 Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Amount you Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Bank of America, NA v. Gary Mortgage **RJ Hughes Justice** Pending **Prince and Aida Suarez Prince Foreclosure** Complex □ On appeal **Superior Court Clerk's** F-028936-17 □ Concluded Office P.O. Box 971 Trenton, NJ 08625-0971 LVNV Funding, LLC v. Addie **Credit Card Sullivan County Supreme** Pending **Prince** Collection □ On appeal E2020-326 **Attn: Supreme Court Clerk** ☐ Concluded 414 Broadway Monticello, NY 12701 **Credit Card** Synchrony Bank v. Gary Prince **Sullivan County Supreme** □ Pending Collection □ On appeal **Attn: Supreme Court Clerk** Concluded 414 Broadway Monticello, NY 12701 Discontinued action

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

■ No. Go to line 11.

Yes. Fill in the information below

Creditor Name and Address

Describe the Property

Explain what happened

Date

Value of the property

		1 9 77 01 00		
	otor 1 Gary Prince otor 2 Aida S. Prince	Case numbe	er (if known)	
	Creditor Name and Address	Describe the Property	Date	Value of the property
		Explain what happened		,
	Bank of America Home Loans Attn: President P.O. Box 21848	Single Family Residence located at 92 Oak Circle Drive, Oak Ridge, NJ 07438		Unknown
	Greensboro, NC 27420-1848	☐ Property was repossessed.		
		■ Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or levied.		
11.	Within 90 days before you filed for bank accounts or refuse to make a payment No Yes. Fill in the details. Creditor Name and Address	kruptcy, did any creditor, including a bank or financial in because you owed a debt? Describe the action the creditor took	nstitution, set off any a	amounts from your
	Creditor Name and Address	Describe the action the creditor took	taken	Amount
Par 13.	Within 2 years before you filed for bank No Yes. Fill in the details for each gift. Gifts with a total value of more than \$6 per person Person to Whom You Gave the Gift and	cruptcy, did you give any gifts with a total value of more 500 Describe the gifts	than \$600 per person? Dates you gave the gifts	? Value
	Address:			
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or	cruptcy, did you give any gifts or contributions with a to contribution.	tal value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankr or gambling?	uptcy or since you filed for bankruptcy, did you lose an	ything because of thef	t, fire, other disaster,
	No			
	☐ Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost

	otor 1	Gary Prince Aida S. Prince	. g c c. c c	Case number (if known)	
Doo	7.01 2	Alua 5. Fillice		ouse number (
Par	t 7:	List Certain Payments or Transfers				
	consu	n 1 year before you filed for bankruptcy, ulted about seeking bankruptcy or prepa e any attorneys, bankruptcy petition prepare	ring a bankruptcy petition?			rty to anyone you
		No				
	— Y	es. Fill in the details.				
	Addr Emai	on Who Was Paid ess il or website address on Who Made the Payment, if Not You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	7 St. P.O. Mon	Offices of Richard Scott Zirt John Street, Suite 101 Box 1315 ticello, NY 12701 ardzirt@gmail.com tor	Attorney Fees		1/2019	\$600.00
	7 St. P.O. Mon	Offices of Richard Scott Zirt John Street, Suite 101 Box 1315 ticello, NY 12701 ardzirt@gmail.com tor	Attorney Fees		10/2/2020	\$1,935.00
	7 St. P.O. Mon	Offices of Richard Scott Zirt John Street, Suite 101 Box 1315 ticello, NY 12701 ardzirt@gmail.com tor	Filing Fees		1/27/2021	\$338.00
	promi	n 1 year before you filed for bankruptcy, ised to help you deal with your creditors t include any payment or transfer that you li	or to make payments to your creditor		r transfer any prope	rty to anyone who
		No				
		es. Fill in the details.				
	Pers Addr	on Who Was Paid ess	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Includinclud	n 2 years before you filed for bankruptcy ferred in the ordinary course of your bus e both outright transfers and transfers made e gifts and transfers that you have already I lo	iness or financial affairs? e as security (such as the granting of a s			
		on Who Received Transfer	Description and value of	Describe a	any property or	Date transfer was
	Addr		property transferred		received or debts	made
10		·	andid was transfer and the first transfer to	alf action to	ot as alsolles deed	of which was are a
	benef	n 10 years before you filed for bankruptc iciary? (These are often called asset-prote lo Yes. Fill in the details.		elf-settled tru	st or similar device	of which you are a
		e of trust	Description and value of the prop	erty transferra	ed	Date Transfer was
	144111		Secondaria and value of the prop	o. cy		made

Debtor 1 Gary Prince
Debtor 2 Aida S. Prince

Case number (if known)

Par	List of Certain Financial Accounts, Ir	nstruments, Safe Depos	it Boxes, and Sto	rage Units	
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accou	ınts; certificates o	of deposit; shares in banks, credit	, ,
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, any	safe deposit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1 y	rear before you filed for bankrupto	y?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?
Par	19: Identify Property You Hold or Contro	I for Someone Else			
23.	Do you hold or control any property that so for someone.	omeone else owns? Inc	lude any property	you borrowed from, are storing for	or, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the property	Value
Par	t 10: Give Details About Environmental In	formation			
For	the purpose of Part 10, the following definit	ions apply:			
	Environmental law means any federal, stat toxic substances, wastes, or material into regulations controlling the cleanup of thes	the air, land, soil, surfac	e water, groundw		
	Site means any location, facility, or proper to own, operate, or utilize it, including disp	-	environmental la	w, whether you now own, operate	, or utilize it or used
	Hazardous material means anything an enhazardous material, pollutant, contaminant		as a hazardous v	waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings th	nat you know about, reg	ardless of when t	they occurred.	
24.	Has any governmental unit notified you that	at you may be liable or p	otentially liable u	ınder or in violation of an environr	mental law?
	■ No □ Yes. Fill in the details.				
	Name of site	Governmental u	nit	Environmental law, if you	Date of notice
	Address (Number, Street, City, State and ZIP Code)	Address (Number, ZIP Code)		know it	2 2.3 3. 110.100

	3	Pg 47 of 63	10/21 18:59:26 Main D	ocument
Debt Debt			Case number (if known)	
5. I	Have you notified any governmental unit of	any release of hazardous material?		
1	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
6. I	Have you been a party in any judicial or adı	ministrative proceeding under any envi	ronmental law? Include settlemen	ts and orders.
] [■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Part	11: Give Details About Your Business or	Connections to Any Business		
I	☐ A member of a limited liability comp ☐ A partner in a partnership ☐ An officer, director, or managing ex ☐ An owner of at least 5% of the votin No. None of the above applies. Go to	ng or equity securities of a corporation	p (LLP)	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification num Do not include Social Securi	
	Within 2 years before you filed for bankrup institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.		Dates business existed o anyone about your business? In	oclude all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Part	12: Sign Below			
re tr vith a 8 U.S	re read the answers on this Statement of Fin rue and correct. I understand that making a a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571. Gary Prince	false statement, concealing property,	or obtaining money or property by	
	ry Prince nature of Debtor 1	Aida S. Prince Signature of Debtor 2		
Date	February 10, 2021	Date February 10, 2021		
Did y o ■ No □ Ye		ent of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form	າ 107)?
Did y	ou pay or agree to pay someone who is no	t an attorney to help you fill out bankru	ptcy forms?	
∃Ye	es. Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration net of Financial Affairs for Individuals Filing	- '	page

Official Form 107

Debtor 1 Gary Prince
Debtor 2 Aida S. Prince

Case number (if known)

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Fill in this infor	mation to identify your	case:		
Debtor 1	Gary Prince			
	First Name	Middle Name	Last Name	
Debtor 2	Aida S. Prince			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DIS	TRICT OF NEW YORK	
Case number (if known)				☐ Check if this is an amended filing
Official Fo		n for Indiv	viduals Filing Under Chapt	ter 7 12/15
_	ividual filing under cha e claims secured by yo	-	Il out this form if:	
You must file thi	ever is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the date e time for cause. You must also send copies to t	
	eople are filing together nd date the form.	r in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
write y	and accurate as possib our name and case nun		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credit	ors that you listed in Pa	art 1 of Schedule D	: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
information be Identify the cr	elow. editor and the property the	hat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's E	Bank of America Hom	e Loans	■ Surrender the property.	■ No
name:			☐ Retain the property and redeem it.	
.			☐ Retain the property and enter into a	☐ Yes
property securing debti	92 Circle Drive Oal 07438 Passaic Co		Reaffirmation Agreement. □ Retain the property and [explain]:	
Creditor's (Capital One Auto Fina	nce	☐ Surrender the property.	□ No
name:		-	Retain the property and redeem it.	
Description of		son 16,100+/-	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt	miles		Retain the property and [explain]: Continue making monthly payments	

Creditor's **Citizens One Home Loans** name:

Description of property 4556 State Route 52

Jeffersonville, NY 12748

Official Form 108

Sullivan County

☐ Surrender the property.

- Retain the property and redeem it.Retain the property and enter into a Reaffirmation Agreement.
- Retain the property and [explain]:

Statement of Intention for Individuals Filing Under Chapter 7

□ No

Yes

Debtor 1 Gary Prince Debtor 2 Aida S. Prince	Case number (if known)
securing debt:	Continue making monthly payments
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed In the information below. Do not list real estate leases. Un You may assume an unexpired personal property lease if	in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill nexpired leases are leases that are still in effect; the lease period has not yet ended. the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my property that is subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any personal
X /s/ Gary Prince	χ /s/ Aida S. Prince
Gary Prince Signature of Debtor 1	Aida S. Prince Signature of Debtor 2

Date

Date

February 10, 2021

February 10, 2021

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
_	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 21-35108-cgm Doc 1 Filed 02/16/21 Entered 02/16/21 18:59:26 Main Document Pg 55 of 63

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of New York

In 1	Gary Prince re Aida S. Prince		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSATION	N OF ATTO	RNEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify compensation paid to me within one year before the filing of the pet be rendered on behalf of the debtor(s) in contemplation of or in contemplation.	ition in bankrupte	y, or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	2,535.00	
	Prior to the filing of this statement I have received		\$	2,535.00	
	Balance Due		ф	0.00	
2.	\$338.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensation wi	th any other person	n unless they are meml	pers and associates of my law firm	
	☐ I have agreed to share the above-disclosed compensation with a copy of the agreement, together with a list of the names of the p				
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rendering advice b. Preparation and filing of any petition, schedules, statement of af c. Representation of the debtor at the meeting of creditors and conf 	fairs and plan which	ch may be required;		

d. [Other provisions as needed]

Consultations with Debtors, exemption planning; preparation and filing of petition, schedules and statements.

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

The commencement, prosecution or defense of any motion practice, contested matter(s) or adversary proceeding(s), including but not limited to loss mitigation proceedings, Rule 2004 examinations, objection to discharge or dischargeability, claims objections, post-confirmation matters (including modification of confirmed Plans and defense of motions to dismiss), matters involving the automatic stay (including the defense of motions for relief from the stay or the extension or imposition of the stay), objections to claims of exemption(s) or steps taken for the protection or preservation of exemption rights, motions to avoid liens (whether judicial liens, junior mortgage liens, or non- purchase money security interests), matters involving the sale, lease or use of property (including the use of cash collateral), matters involving financing, matters involving the cramdown of secured claims, the retention of professionals, applications for compensation and reimburement of expenses, transactional matters, matters involving the dischargeability of certain taxes and student loans, matters involving abandonment, turnover, preference or fraudulent conveyance, appeals from orders of the Bankruptcy Court, the defense of appeals taken by others from orders of the Bankruptcy Court, and proceedings in any other court, tribunal or administrative agency.

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In re	Gary Prince Aida S. Prince		Case No.	Case No.
		Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete stathis bankruptcy proceeding.	tement of any agreement or arrangement for payment to me for representation of the debtor(s)
February 10, 2021	/s/ Richard Scott Zirt, Esq.
Date	Richard Scott Zirt, Esq.
	Signature of Attorney
	Law Offices of Richard Scott Zirt
	7 St. John Street - Suite 101
	P.O. Box 1315
	Monticello, NY 12701
	(845) 794-5928 Fax: (845) 794-5961
	richardzirt@gmail.com
	Name of law firm

United States Bankruptcy Court Southern District of New York

In re	Gary Prince Aida S. Prince		Case No.	
		Debtor(s)	Chapter	7
	VED	DIEICATION OF CREDITOR	MATDIY	
	VER	RIFICATION OF CREDITOR	MAIKIX	
The ob-	ove nemad Debtone boneby venify	that the attached list of analitans is two and a	oment to the heat.	of their linewiledge
ne ab	ove-named Dediors hereby verify	that the attached list of creditors is true and c	orrect to the best of	of their knowledge.
Date:	February 10, 2021	/s/ Gary Prince		
		Gary Prince		
		Signature of Debtor		
Date:	February 10, 2021	/s/ Aida S. Prince		
		Aida S. Prince		

Signature of Debtor

ALTICE USA, INC. ATTN: PRESIDENT 1 COURT SQUARE WEST LONG ISLAND CITY, NY 11101

AMERICAN EXPRESS PLATINUM CARD ATTN: PRESIDENT P.O. BOX 659728 SAN ANTONIO, TX 78265-9728

BANK OF AMERICA HOME LOANS ATTN: PRESIDENT P.O. BOX 31785 TAMPA, FL 33631-3785

BARCLAY CARD SERVICES ATTN: PRESIDENT P.O. BOX 8802 WILMINGTON, DE 19899-8802

BARCLAY CARD SERVICES ATTN: PRESIDENT P.O. BOX 13337 PHILADELPHIA, PA 19101-3337

CAPITAL ONE ATTN: PRESIDENT P.O. BOX 30285 SALT LAKE CITY, UT 84130

CAPITAL ONE AUTO FINANCE ATTN: PRESIDENT P.O. BOX 60511 CITY OF INDUSTRY, CA 91716-0511

CELENTANO, STADTMAUER, ET AL. ATTN: MANAGING PARTNER P.O. BOX 2594 CLIFTON, NJ 07015

CERTIFIED CREDIT & COLLECTION ATTN: PRESIDENT P.O. BOX 1750 WHITEHOUSE STATION, NJ 08889 CHASE - AMAZON REWARDS ATTN: PRESIDENT P.O. BOX 15123 WILMINGTON, DE 19850

CHASE AUTOMOTIVE FINANCE ATTN: PRESIDENT P.O. BOX 78068 PHOENIX, AZ 85062-8068

CHASE CARD SERVICES ATTN: PRESIDENT P.O. BOX 6294 CAROL STREAM, IL 60197-6294

CITIZENS ONE AUTO FINANCE ATTN: PRESIDENT P.O. BOX 42113 PROVIDENCE, RI 02940

CITIZENS ONE HOME LOANS ATTN: PRESIDENT P.O. BOX 42111 PROVIDENCE, RI 02940-2111

COMENITY BANK
ATTN: PRESIDENT
P.O. BOX 182125
COLUMBUS, OH 43218-2125

CREDIT CONTROL
ATTN: PRESIDENT
P.O. BOX 4635
CHESTERFIELD, MO 63006

DISCOVER ATTN: PRESIDENT P.O. BOX 30953 SALT LAKE CITY, UT 84130-0953

FIRST SOURCE ADVANTAGE, LLC ATTN: PRESIDENT P.O. BOX 628 BUFFALO, NY 14240-0628

FRENKEL, LAMBERT, WEISS ET AL ATTN: MANAGING PARTNER 80 MAIN STREET, SUITE 460 WEST ORANGE, NJ 07052

HOME DEPOT ATTN: PRESIDENT P.O. BOX 6497 SIOUX FALLS, SD 57117-6497

JERSEY CENTRAL POWER & LIGHT ATTN: PRESIDENT P.O. BOX 3687 AKRON, OH 44309-3687

KIRSCHENBAUM & PHILLIPS, PC 40 DANIEL STREET, STE 7 P.O. BOX 9000 FARMINGDALE, NY 11735

LINCARE, INC. ATTN: PRESIDENT P.O. BOX 690397 ORLANDO, FL 32869

LVNV FUNDING, LLC ATTN: PRESIDENT P.O. BOX 10584 GREENVILLE, SC 29603

MICHAEL HARRISON, ESQ. SUITE 214 3155 ROUTE 10 EAST DENVILLE, NJ 07834

MONTCLAIR RADIOLOGY GROUP ATTN: PRESIDENT 116 PARK STREET MONTCLAIR, NJ 07042

NORTHWEST RADIOLOGY ASSOCIATES ATTN: PRESIDENT 45 PINE STREET, SUITE 8 ROCKAWAY, NJ 07866 OPTIMUM ATTN: PRESIDENT 1111 STEWERT AVENUE BETHPAGE, NY 11714-3581

PHILLIPS & COHEN ASSOC., LTD. ATTN: PRESIDENT 1002 JUSTISON STREET WILMINGTON, DE 19801

PROSPER FUNDING, LLC ATTN: PRESIDENT 221 MAIN STREET, SUITE 300 SAN FRANCISCO, CA 94105

PULMONARY MEDICAL ASSOC., LLP ATTN: PRESIDENT 222 HIGH STREET, SUITE 102 NEWTON, NJ 07860-9604

RADIUS GLOBAL SOLUTIONS, LLC ATTN: PRESIDENT P.O. BOX 390905 MINNEAPOLIS, MN 55439

REBECCA PRINCE 13 DECKER FARM ROAD MONTICELLO, NY 12701

RESURGENT CAPITAL SERVICELP ATTN: PRESIDENT 55 BEATIE PLACE, SUITE 110 GREENVILLE, SC 29601

RESURGENT CAPITAL SERVICES, LP ATTN: PRESIDENT P.O. BOX 10497 MAIL STOP 576 GREENVILLE, SC 29603

RJ HUGHES JUSTICE COMPLEX SUPERIOR COURT CLERK'S OFFICE P.O. BOX 971 TRENTON, NJ 08625-0971 SHERMAN ORIGINATOR, III LLC ATTN: PRESIDENT 200 MEETING STREET CHARLESTON, SC 29401

ST. CLARE'S DENVILLE HOSPITAL ATTN: PRESIDENT 25 POCONO ROAD DENVILLE, NJ 07834

SUBARU MOTORS FINANCE ATTN: PRESIDENT P.O. BOX 901076 FORT WORTH, TX 76101-2076

SULLIVAN COUNTY CLERK'S OFFICE SULLIVAN COUNTY GOV'T CENTER 100 NORTH STREET MONTICELLO, NY 12701

SULLIVAN COUNTY SUPREME CT. ATTN: SUPREME COURT CLERK 414 BROADWAY MONTICELLO, NY 12701

SYNCHRONY BANK ATTN: PRESIDENT 55 BEATTIE PLACE, SUITE 110 GREENVILLE, SC 29601

SYNCHRONY BANK ATTN: PRESIDENT P.O. BOX 965033 ORLANDO, FL 32896-0061

SYNCHRONY BANK ATTN: PRESIDENT P.O. BOX 960061 ORLANDO, FL 32896-0061

SYNCHRONY BANK - PAYPAL ATTN: PRESIDENT P.O. BOX 960090 ORLANDO, FL 32896 SYNCHRONY BANK - AMAZON ATTN: PRESIDENT P.O. BOX 965060 ORLANDO, FL 32896-0061

SYNCHRONY BANK - CARECREDIT ATTN: PRESIDENT P.O. BOX 960061 ORLANDO, FL 32896-0061

WALMART - SYNCHONY BANK ATTN: PRESIDENT P.O. BOX 965022 ORLANDO, FL 32896-5022

ZWICKER & ASSOCIATES, PC ATTN: MANAGING PARTNER 80 MINUTEMAN ROAD ANDOVER, MA 01810-1008